

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

Substitute for Form PTO-1360
(For use with Form PTO/SB/06)

Application Number

10587389

Filing Date

Applicant(s) Stefano COLLOCA

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		Indep	Depend	Indep	Depend	Indep	Depend
	Indep	Depend	Indep	Depend	Indep	Depend						
1	1		1				51					
2	1		1				52					
3	1		1				53					
4	1		1				54					
5	1		---	---			55					
6	1			1			56					
7		1	---	---			57					
8		1		1			58					
9		1	---	---			59					
10		2	---	---			60					
11		1	---	---			61					
12		1	---	---			62					
13		3	---	---			63					
14		1	---	---			64					
15		1	---	---			65					
16		1	---	---			66					
17		1	---	---			67					
18		1	---	---			68					
19		1	---	---			69					
20		1	---	---			70					
21		1	---	---			71					
22	1			(1)			72					
23		1	---	---			73					
24		1	---	---			74					
25		1	---	---			75					
26		1	---	---			76					
27	1		---	---			77					
28		1	---	---			78					
29		1	---	---			79					
30		1		1			80					
31		1	---	---			81					
32		1	---	---			82					
33		1	---	---			83					
34		1	---	---			84					
35	1		1				85					
36		1	---	---			86					
37		1	---	---			87					
38		1	---	---			88					
39		1	---	---			89					
40		1	---	---			90					
41		1	---	---			91					
42		1		1			92					
43			1				93					
44				1			94					
45			1				95					
46				1			96					
47				1			97					
48				1			98					
49				1			99					
50				1			100					
Total Indep	13			7		0						
Total Depend	32		←	11	←	0						
Total Claims	45	██████████		18	██████████	0	██████████					